

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																																																					
1 Date of Request: <u>9-7-85</u>		2 Serial/Patent # <u>09/672843</u>																																																			
3 Please refund the following fee(s): <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr><td style="width: 10%;"></td><td style="width: 80%;">Filing</td><td style="width: 10%;">4 PAPER NUMBER</td><td style="width: 10%;">5 DATE FILED</td><td style="width: 10%;">6 AMOUNT</td></tr> <tr><td></td><td>Amendment</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Extension of Time</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Notice of Appeal/Appeal</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Petition</td><td></td><td>6-13-85</td><td>\$ 750</td></tr> <tr><td></td><td>Issue</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Cert of Correction/Terminal Disc.</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Maintenance</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Assignment</td><td></td><td></td><td>\$</td></tr> <tr><td></td><td>Other</td><td></td><td></td><td>\$</td></tr> </table>		Filing	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT		Amendment			\$		Extension of Time			\$		Notice of Appeal/Appeal			\$		Petition		6-13-85	\$ 750		Issue			\$		Cert of Correction/Terminal Disc.			\$		Maintenance			\$		Assignment			\$		Other			\$	7 TOTAL AMOUNT OF REFUND \$ 750		
	Filing	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT																																																	
	Amendment			\$																																																	
	Extension of Time			\$																																																	
	Notice of Appeal/Appeal			\$																																																	
	Petition		6-13-85	\$ 750																																																	
	Issue			\$																																																	
	Cert of Correction/Terminal Disc.			\$																																																	
	Maintenance			\$																																																	
	Assignment			\$																																																	
	Other			\$																																																	
10 REASON: <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr><td style="width: 10%;"></td><td style="width: 80%;">Overpayment</td><td style="width: 10%;">8 TO BE REFUNDED BY:</td></tr> <tr><td></td><td>Duplicate Payment</td><td>Treasury Check</td></tr> <tr><td></td><td>No Fee Due (Explanation):</td><td><input checked="" type="checkbox"/> Credit Deposit A/C #:</td></tr> </table>			Overpayment	8 TO BE REFUNDED BY:		Duplicate Payment	Treasury Check		No Fee Due (Explanation):	<input checked="" type="checkbox"/> Credit Deposit A/C #:	9 <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 25%;">1</td><td style="width: 25%;">1</td><td style="width: 25%;">1</td><td style="width: 25%;">1</td> <td style="width: 25%;">--</td><td style="width: 25%;">1</td><td style="width: 25%;">4</td><td style="width: 25%;">1</td><td style="width: 25%;">8</td> </tr> </table>		1	1	1	1	--	1	4	1	8																																
	Overpayment	8 TO BE REFUNDED BY:																																																			
	Duplicate Payment	Treasury Check																																																			
	No Fee Due (Explanation):	<input checked="" type="checkbox"/> Credit Deposit A/C #:																																																			
1	1	1	1	--	1	4	1	8																																													
<u>Petition fee unnecessary.</u>																																																					
11 REFUND REQUESTED BY: <table style="width:100%; margin-top: 5px;"> <tr> <td style="width: 50%;">TYPED/PRINTED NAME: <u>Karen Crea</u></td> <td style="width: 50%;">TITLE: <u>Pets. Exmr.</u></td> </tr> <tr> <td>SIGNATURE: <u>Karen Crea</u></td> <td>PHONE: <u>272-3208</u></td> </tr> <tr> <td colspan="2">OFFICE: <u>DAE for Patents</u></td> </tr> </table>				TYPED/PRINTED NAME: <u>Karen Crea</u>	TITLE: <u>Pets. Exmr.</u>	SIGNATURE: <u>Karen Crea</u>	PHONE: <u>272-3208</u>	OFFICE: <u>DAE for Patents</u>																																													
TYPED/PRINTED NAME: <u>Karen Crea</u>	TITLE: <u>Pets. Exmr.</u>																																																				
SIGNATURE: <u>Karen Crea</u>	PHONE: <u>272-3208</u>																																																				
OFFICE: <u>DAE for Patents</u>																																																					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: <u>Ullia Kelly</u> DATE: <u>9/8/85</u>																																																					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**